

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18	1					
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20						
21						
22						
23						
24						
25						
26	1					
27						
28						
29	1					
30	1					
31	1					
32	1					
33	1					
34						
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36						
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40						
41						
42						
43						
44						
45						
46	1					
47	1					
48						
49						
50						
TOTAL IND.	3					
TOTAL DEP.	44					
TOTAL CLAIMS	47					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS